FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Committees	orporations
(a) Name of Individual, Organization or Corporation	
LEAGUE OF CONSERVATION VOTERS INC	
(b) Address (number and street)	
1920 L STREET NW #800	
(c) City, State and ZIP Code	O FFO Havel'Cook's a Newborn
WASHINGTON DC 20036	3. FEC Identification Number C C90005786
2. Corporate filers only Is the filer a qualified nonprofit corporation? X Yes No	9 900000,00
Individual filers only Name of Employer	Occupation
4. TYPE OF REPORT (check appropriate boxes):	
(a) April 15 Quarterly Report	Report
☐ July 15 Quarterly Report	
☐ October Quarterly Report	
☐ January 31 Year-End Report	
(b) Is this Report an amendment? Yes \(\subseteq \text{No } \(\text{X} \)	
5. COVERING PERIOD: FROM 10 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
THROUGH	
M M / D B / Y Y Y O O 6 Y	
	.00
6. TOTAL CONTRIBUTIONS	
7. TOTAL INDEPENDENT EXPENDITURES	130831.97
Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or i request or suggestion of, a candidate or a candidate's agent or authorized committee or a political party committee or its agent. In addition, if t reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulation	he independent expenditures
TYPE OR PRINT NAME OF PERSON COMPLETING FORM SIGNATURE	DATE
Barbara G. McIntosh	10/16/2006
NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report t	o the penalties of 2 LLS C 437a

For further information, contact:

Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

5PG021 FEC Schedule 5 (Rev. 09/2005)

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FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full) LEAGUE OF CONSERVATION VOTERS INC Full Name (Last, First, Middle Initial) of Payee Date Group SJR 2006 Mailing Address Amount 919 3rd Ave, 39th FL 64854.00 City State Zip Code New York NY 10022 Purpose of Expenditure Office Sought: Category/ House State: MT 006 TV time buy Type Χ Senate Senate District: President Name of Federal Candidate Supported or Opposed by Expenditure: Tester Check One: Support Oppose Disbursement For: Primary General Calendar Year-To-Date Per Election 2524.43 for Office Sought Other (specify) Full Name (Last, First, Middle Initial) of Payee Date Group SJR 2006 Mailing Address **Amount** 919 3rd Ave, 39th FL 18750.00 Zip Code City State New York NY 10022 Purpose of Expenditure Office Sought: House State: MT Category/ 004 production costs TV spot Туре Χ Senate Senate District: President Name of Federal Candidate Supported or Opposed by Expenditure: Tester Check One: χ Support Oppose Disbursement For: Primary General Calendar Year-To-Date Per Election 67378.43 for Office Sought Other (specify) Full Name (Last, First, Middle Initial) of Payee Date Burnside & Associates 2006 Mailing Address Amount 1311 Tremaine Ave 6500.00 Zip Code City State 90019 CA Los Angeles Purpose of Expenditure Office Sought: State: CA Category/ X House 001 general canvassing consulting fee Type Senate House District: 11 President Name of Federal Candidate Supported or Opposed by Expenditure: Pombo Check One: Support X Oppose Disbursement For: Primary General Calendar Year-To-Date Per Election 106855.82 for Office Sought Other (specify) 90104.00 (a) SUBTOTAL of Itemized Independent Expenditures ... (b) SUBTOTALof Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures (carry total from last page forward to Line 7)

SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

I	FAGLIF	OF	CONSER\	/ATION '	VOTERS	INC

Full Name (Last, First, Middle Initial) of Payee				Date
Burnside & Associates				M M / D D / Y Y Y
Mailing Address				10 16 2006
1311 Tremaine Ave				Amount
City	State	Zip Code		10204.00
,	CA	90019		
Purpose of Expenditure		Category/		Office Sought: X House State: CA
Paid canvass		Type	001	House Senate
Name of Federal Candidate Supported or Opposed by Ex	penditure:			President District: 11
Pombo				Check One: Support X Oppose
				Disbursement For: Primary General
Calendar Year-To-Date Per Election for Office Sought		11335	55.82	
				Other (specify)
Full Name (Last, First, Middle Initial) of Payee				Date
				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address				Amount
3012 San Rafael SE				100.00
	State	Zip Code		100.00
' '	NM	87106		
Purpose of Expenditure		Category/	001	Office Sought: X House State: NM
canvasser - pymt for svcs		Type	001	House Senate District: 01
Name of Federal Candidate Supported or Opposed by Ex	penditure:			President
Madrid				Check One: X Support Dppose
Calendar Year-To-Date Per Election				Disbursement For: Primary General
for Office Sought		7690	06.47	Other (specify)
Full Name (Last, First, Middle Initial) of Payee				<u> </u>
Tail value (Eact, Flict, Madie Hillar) of Fayer				Date
Mailing Adduses				$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
Mailing Address 2281 Wilbur SW				Amount
	01-1-	7:- 0		200.00
	State NM	Zip Code 87105		
Purpose of Expenditure	1			Office Sought: Y House Charles NM
canvasser - pymt for svcs		Category/ Type	001	State: TYW
Name of Federal Candidate Supported or Opposed by Ex	manditura:	. , , , ,		House Senate District: 01
Madrid	cperialiture:			
Calendar Year-To-Date Per Election		7700)C 47	Disbursement For: Primary General
for Office Sought		7700	06.47	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures				10504.00
(b) SUBTOTALof Unitemized Independent Expenditures.				
(c) TOTAL Independent Expenditures				

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FOR LINE 7 FOR FORM 5

AME OF FILER (In Full) LEAGUE OF CONSERVATION VOTERS	SINC			
Full Name (Last, First, Middle Initial) of Payee				Date
Mailing Address 915 Lead Ave SE #W				M M / D D / Y Y Y Y Y Y A Y A Y A Amount
City Albuquerque	State NM	Zip Code 87107		150.00
Purpose of Expenditure canvasser - pymt for svcs		Category/ Type	001	Office Sought: X House State: NM House Senate District: 01
Name of Federal Candidate Supported or Opp Madrid	osed by Expenditure:			Check One: X Support Oppose
Calendar Year-To-Date Per Election for Office Sought	<u> </u>	7720	06.47	Disbursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee Am Ex: Enterprise				Date Date D D
Mailing Address PO Box 297812		7: 0 1		Amount 249.64
City Ft Lauderdale	State FL	Zip Code 33329		
Purpose of Expenditure van rental for canvass		Category/ Type	001	Office Sought: X House State: NM House Senate District: 01
Name of Federal Candidate Supported or Opp Madrid	osed by Expenditure:			Check One: X Support Oppose
Calendar Year-To-Date Per Election for Office Sought		7735	56.47	Disbursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee Gold Communications				Date M M / D D / Y Y Y Y A 0 0 0 6
Mailing Address 1617 W 6th, Ste B				1 0 1 6 2 0 0 6 Amount 29824.33
City Austin	State TX	Zip Code 78703		
Purpose of Expenditure mail piece printing and mailing		Category/ Type	006	Office Sought: X House State: NM House Senate District: 01
Name of Federal Candidate Supported or Opp Madrid	osed by Expenditure:			Check One: X Support Oppose
Calendar Year-To-Date Per Election for Office Sought		7760)1.11	Disbursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expe	nditures			30223.97
(b) SUBTOTALof Unitemized Independent Ex	penditures			
(c) TOTAL Independent Expenditures(carry total from last page forward				130831.97